

Town of Nolensville

Permit:_____

Permit Application to Solicit Goods

Expiration Date:_____

Please Print

					rica	se Pr	·····							
Name of Applicant							Cell Phone # Email Address							
Name of Organization/Business Applicant represents							Business and/or Privilege License # (copy attached) Expiration Date						tion Date	
Organization/Business Address							Organization/Business Phone # Employee? Y N Proof?							
Description of type	pe of Busin	ness an	d Goods t	o be sol	d:		Dates applicant intends to do business or make solicitations:							
same time that holder in violation	the permi on of Title	t holder 9-Chap	's privileg oter 1, su	ie/busin ch viola	s permit null and vess license expir tion shall be puni ute a separate of	es. I shab	n addition to a ble by penalty	any oth of up	her actio to five h	n the undre	Town may	take a	gainst a	permit
					ors shall be name to utilize peddlers							no more	than o	ne
Signature of App	licant		•	<u>_</u>	,		Date							
Every solicit to commenc					lete the followes.	vinç	g informatio	on ar	nd rece	eive a	approval	by th	e Tow	n prior
First	Middle		Last N	ame			First	M	liddle		Last Na	ame		
Permanent Addre	SS						Permanent Address							
Email Address Date of Birth							Email Address Date of Birth							
Cell Phone # Social Security #					Cell Phone # Social Security #									
Driver's License N	lumber*	State D	L Issued	Circle C	one: ale Female		Driver's Licens	se Nun	nber*	State [OL Issued	Circle C		Female
Y N Do you have any criminal charges pending against you? Y N Have you ever been convicted of any crime or misdemeanor or for violating any municipal ordinance anywhere? If Yes, what was the date and nature of the offense and the punishment or penalty assessed therefore: Y N Do you have any criminal charges pending against you? Y N Have you ever been convicted of any crime or misdemeanor or for violating any municipal ordinance anywhere? If Yes, what was the date and nature of the offense and the punishment or penalty assessed therefore:									meanor					
I hereby au information and a background check any moving violat outstanding crimin	cknowledg k on the in ion history	e that th formation, crimina	ne Town o n provide	of Nolens d in this	sville may run a form, along with		I hereby a information an background chany moving vio outstanding cr	nd ackr neck o olation	nowledge in the info i history,	e that to ormation crimin	on provided	f Nolens d in this	sville ma form, al	y run a ong with
Signature				Date		1	Signature					Date		
* A copy of your D must be attached			Verified	by	Date		* A copy of you must be attack				Verified b	ру		Date
The following solicitation in	_		n must	be c	ompleted for	ev	ery vehicle	e to	be us	ed w	vithin th	e Tov	vn lim	its for
VEHICLE OWNE	ER: First,	Middle a	and Last N	lame]	VEHICLE OV	VNER	: First, M	/liddle	and Last N	ame		
Make	Model		Year		Color		Make	N	Model		Year		Color	
Tag No.			Issuing	State	Expiration Date		Tag No.				Issuing S	State	Expira	tion Date
Transient vend Are you a trans				ed to p	lay music not to	exc	eed 90 db be	tweer	n 10 am	and 8	8 pm.		1	
If yes, please i				/ music	YN									

\$50 fee per application	Total Fees Rcv'd	Date Paid	Check No.	Staff
\$50 fee per application				

ADDITIONAL SOLICITORS/SALESPEOPLE:

First Middle	Last N	ame	First	Middle	Last N	lame	
Permanent Address			Permane	nt Address			
Email Address		Date of Birth	Email Ad	dress		Date of Bir	th
Cell Phone #	Social S	ecurity #	Cell Phor	ne #	Social Secu	urity #	
Driver's License Number* State	DL Issued	Circle One: Male Female		icense Number*	State DL Issued	Circle One: Male	Female
Y N Do you have any criminal Y N Have you ever been convor for violating any munic If Yes, what was the date punishment or penalty assessed	victed of any ipal ordinan and nature therefore:	or crime or misdemeanor ce anywhere? of the offense and the	Y N F	Have you ever been for violating any factor Yes, what was the ent or penalty ass		y crime or misonce anywhere?	demeanor and the
I hereby authorize and co information and acknowledge th a background check on the infor with any moving violation history or outstanding criminal warrants	at the Tow mation pro ,, criminal t	n of Nolensville may rur vided in this form, along	information information information information in a backgrowith any	on and acknowle ound check on th	nd consent to the dge that the Tow he information pro history, criminal I arrants.	n of Nolensvil ovided in this f	lle may run form, along
Signature		Date	Signatu			Date	
* A copy of your Driver's License must be attached for approval	Verified	Date Date		of your Driver's Lic attached for appro		by	Date

ADDITIONAL VEHICLES

VEHICLE OWNER: First, Middle and Last Name					VEHICLE OWNER: First, Middle and Last Name					
Make	Model	Year Color			Make	Model	Year	Color		
Tag No.		Issuing State	Expiration Date		Tag No.		Issuing State	Expiration Date		